

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 240427US0X
		First Inventor or Application Identifier Kai ROSEN
		Title METHOD OF PRODUCING 5-FORMYL-2-FURYLBORONIC ACID

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<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents</small>		<b>ADDRESS TO:</b> Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		<b>ACCOMPANYING APPLICATION PARTS</b>
2. <input checked="" type="checkbox"/> Specification Total Sheets <input type="text" value="12"/>		7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
3. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets <input type="text"/>		8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76
4. <input type="checkbox"/> Oath or Declaration Total Pages <input type="text"/> <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d))  <small>(for continuation/divisional with box 17 completed)</small> </li> </ol>		9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <small>(when there is an assignee)</small> <input type="checkbox"/> Power of Attorney
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		10. <input type="checkbox"/> English Translation Document (if applicable)
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li> <li>b. Specification or Sequence Listing on :           <ol style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input type="checkbox"/> Paper</li> <li>c. <input type="checkbox"/> Statements verifying identity of above copies</li> </ol> </li> </ol>		11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)    of prior application no.: _____		12. <input type="checkbox"/> Preliminary Amendment
Prior application information: Examiner: _____		13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard
		14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>
		15. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small>
		16. <input checked="" type="checkbox"/> Other: Request for Priority
<b>18. CORRESPONDENCE ADDRESS</b>		
Customer Number <b>22850</b> (703) 413-3000 FACSIMILE: (703) 413-2220		

Name:	Norman F. Oblon	Registration No.:	24,618
Signature:	<i>Kirsten Gruneberg</i>		Date: 9/17/03
Name:	Kirsten A. Gruneberg, Ph.D.	Registration No.:	47,297

Docket No. 240427US0X

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

INVENTOR(S) Kai ROSEN, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: METHOD OF PRODUCING 5-FORMYL-2-FURYLBORONIC ACID

**FEE TRANSMITTAL**

COMMISSIONER FOR PATENTS  
ALEXANDRIA, VIRGINIA 22313

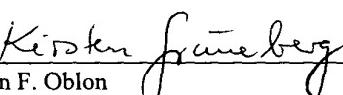
FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	20 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$84 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
			BASIC FEE	\$750.00
			TOTAL OF ABOVE CALCULATIONS	\$880.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
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			TOTAL	\$880.00

- Please charge Deposit Account No. 15-0030 in the amount of **\$0.00** A duplicate copy of this sheet is enclosed.
- A check in the amount of **\$880.00** to cover the filing fee is enclosed.
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Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.

Date: 9/17/03

  
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